



Case Docket No. SMQ-034

THE ASSISTANT COMMISSIONER FOR PATENTS Pay Potent Application

Box Patent Application Washington, D.C. 20231

| "Express Mail" Mailing Label Number EL589739964US |
|--|
| Date of Deposit November 8, 2000 |
| hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231. |
| Signature |
| Ilidio P. Cardoso |
| Please Print Name of Person Signing |

| | 09/708822 |
|------------|-----------|
| prior app | lication |
| ordation t | form |
| • | |

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s):

Yvetta D. Pols Sandhu et al.

For:

 \boxtimes

RACK SECURITY MECHANISM

Enclosed are:

| ш | serial no filed on entitled | , of pending prior application |
|---|---|--------------------------------|
| X | 1 cover page. | |
| X | 8 pages of specification, 5 pages of claims, 1 pages of abstract. | |
| X | 8 sheets of drawings. | |
| X | A Declaration, Petition and Power of Attorney. | |
| X | An assignment of the invention to SUN MICROSYSTEMS, INC cover sheet (Form PTO 1595) is also enclosed. | . A recordation form |
| | A verified statement to establish small entity status under 37 C.F.R. 1.9 and 37 C.F.R. 1.27. | |
| | Other | |

The filing fee has been calculated as shown below:

| (Col. 1) (Col. 2) | | | | | |
|--|-----------|-----------|--|--|--|
| FOR: | NO. FILED | NO. EXTRA | | | |
| BASIC FEE ////////////////////////////////// | | | | | |
| TOTAL CLAIMS $34 - 20 = 14$ | | | | | |
| INDEP. CLAIMS | 4 - 3 | = 1 | | | |
| ☐ MULTIPLE DEPENDENT CLAIMS PRESENTED | | | | | |

* If the difference in Col. 2 is less than zero, enter "0" in Col. 2.

| DIALLED DIALIT | MALL ENTITY |
|----------------|-------------|
|----------------|-------------|

| RATE | FEE | <u>OR</u> |
|-----------|-----|-----------|
| ///////// | \$ | <u>OR</u> |
| x 9= | \$ | <u>OR</u> |
| x 40 | \$ | <u>OR</u> |
| +135 | \$ | <u>OR</u> |
| TOTAL | 0 | <u>OR</u> |
| | | |

OTHER THAN
SMALL ENTITY

| RATE | FEE | |
|----------|-----------|--|
| //////// | \$ 710 | |
| x 18= | \$ 252 | |
| x 80 | \$ 80 | |
| +270 | \$ | |
| TOTAL | \$1042.00 | |
| | | |

| Please charge my Deposit Account No. 12-0080 in the amount of \$. |
|---|
| A duplicate copy of this sheet is enclosed. |

 \blacksquare A check in the amount of \$_\$1042.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-0080.

A duplicate copy of this sheet is enclosed.

| | X | | ng fees required under 37 C.F | | |
|--------|-----------------------|-------------------------------------|---|---|---------------------|
| | this appl | • | authorized to charge payment overpayment to Deposit Acco t is enclosed. | | ing the pendency of |
| | | | ion processing fees under 37 (37 C.F.R. 1.18 at or before m R 1.311(b). | | lowance, |
| | | Any filing fees und | er 37 C.F.R. 1.16 for presenta | tion of extra claims. | |
| X | A check is also er | _ | 40.00 to cover the record | ling of assignment docum | ents |
| X | | all future communication J. Canning | ations (May only be completed at Custome | d by applicant, or attorney r Number: 000959 whos | - |
| | | | Lahive & Coc | • | |
| | | | 28 State | | |
| | | | Boston, Massach | | |
| Date:_ | November | r 8, 2000 | — — — — — — — — — — — — — — — — — — — | AHIVE & COCKFIELD Attorneys at Law By Detweiler, Esq. Reg. No. 42,482 28 State Street Boston, MA 02109 617) 227-7400 Felecopier (617) 742-421- | the |